

**MGA Health Clinic**  
Middle Georgia State University

**Macon campus, Music Education Bldg.**

100 University Parkway, Macon, GA 31206

Phone: 478-471-2092 / Fax: 478-471-2779

**Cochran campus, Georgia Hall, lower level**

1100 Second St. S.E., Cochran, GA 31014

Phone: 478-934-3080 / Fax: 478-934-3090

**MEDICAL RECORDS RELEASE FORM**

<b>Patient Name:</b> _____			
<b>Street Address:</b> _____			<b>Apt #:</b> _____
<b>City:</b> _____		<b>State:</b> _____	<b>Zip:</b> _____
<b>Phone:</b> _____	<b>DOB:</b> _____	<b>MGA ID #:</b> <b>983</b> _____	
<b>I authorize release from: name of disclosing party</b>		<b>To release to: name of receiving party</b>	
<b>Name:</b> _____		<b>Name:</b> _____	
<b>Address:</b> _____		<b>Address:</b> _____	
<b>City:</b> _____		<b>City:</b> _____	
<b>State:</b> _____	<b>Zip:</b> _____	<b>State:</b> _____	<b>Zip:</b> _____
<b>Phone:</b> _____	<b>Fax:</b> _____	<b>Phone:</b> _____	<b>Fax:</b> _____
<b>Please check box below for specific information to be released:</b>			
<input type="checkbox"/> <b>General medical records</b> (includes lab results, provider notes, etc) <input type="checkbox"/> <b>Immunization records only</b> <input type="checkbox"/> <b>Drug/Alcohol records only</b> <input type="checkbox"/> <b>HIV test results only</b> *DPH release required <input type="checkbox"/> <b>Other (Specify):</b> _____			
<b>Please:</b>		<b>The purpose of this release is for:</b>	
<input type="checkbox"/> <b>Mail the records</b> <input type="checkbox"/> <b>Fax the records</b> <input type="checkbox"/> <b>Electronic Transfer</b> <input type="checkbox"/> <b>I will pick up the records</b>		<input type="checkbox"/> <b>Continuity of care</b> <input type="checkbox"/> <b>Other:</b> _____ _____	

**My consent may be revoked at any time. Unless previously revoked, this consent will terminate six(6) months after the date of my signing this consent. Each disclosure requires an additional signed authorization.**

**Signature of Patient:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Witness:** \_\_\_\_\_ **Date:** \_\_\_\_\_